

Abuelito Cheese Process Water Meter Reading

03/01/09 starting water meter reading 621880 cu/ft

03/31/09 ending meter reading 642590cu/ft

642590

621880 —

20710 cu/ft

20710cu/ft x 7.48=154910 x.95=147165 total gallons for
the month of March

147165divided by 23 days= 6398 gallons per day

Abuelito 3/09 Sanitary Meter Reading

50706 starting reading

51390 ending reading

51390

50706

684cu/ft

684cu/ft x 7.48=5116 div by 23 =222gpd



ANALYTICAL DATA REPORT

for
Abuelito Cheese
607 Main Street
Paterson, NJ 07503

Project Name: PVSC MONITORING
Lab Case Number: E09-02387

MDL = METHOD DETECTION LIMIT

Metals

Lab ID: 02387-001
Client ID: WW COMPOSITE
Matrix-Units: Aqueous-mg/L
Percent Moisture: 100

Date Sampled: 3/9/2009
Time Sampled: NA
Date Analyzed: 3/12/09

Parameter	Result	Q	MDL
Cadmium	ND		0.001
Copper	0.034		0.008
Lead	0.00288		0.002
Mercury	ND		0.0005
Nickel	0.00639		0.004
Zinc	0.223		0.008

General Analytical

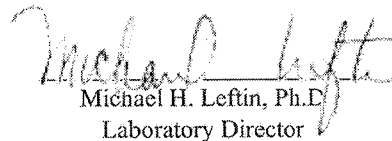
Lab ID: 02387-001
Client ID: WW COMPOSITE
Percent Moisture: 100

Date Sampled: 3/9/2009
Time Sampled: NA

Parameter	Result	MDL	Matrix-Units	Date Analyzed
Biochemical Oxygen Demand	3710	2.00	Aqueous-mg/L	3/11/2009 8:00
Total Suspended Solids	995	125	Aqueous-mg/L	3/11/2009 11:00

ND = Analyzed for but Not Detected at the MDL

These data have been reviewed and accepted by:


Michael H. Leftin, Ph.D.
Laboratory Director

273 Franklin Road
Randolph, NJ 07869
Phone: 973 361 4252
Fax: 973 989 5288



IAL is a NELAP New Jersey Certified Lab (14757) and maintains certification in Connecticut (PH 00126), New York (11402), Pennsylvania (00120), Pennsylvania 008 (01773) and in the Department of Navy IS QA Program.

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CUSTOMER INFO

Company: Allen Lane

Address: 407 20th Ave

Paterson N.J.07513

Telephone #:

Fax #

Project Manager:

Sampler: Hanover Controls

Project Name: PVSC MONITORING

Project Location (State): NJ

Bottle Order #:

Quote #:

REPORTING INFO

REPORT TO: Hanover Controls

Address: 11 Windsor W;

East Hanover N.J. 07936

Attn: John Ceresnak

FAX # E-Mail cerez4741@optonline.net

INVOICE TO:	Above
-------------	-------

Address:

Attn:

04



SAMPLE INFORMATION

[illegible]

	Known Hazard	Yes or No	Description:
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Please print legibly and fill out completely. Samples cannot be processed and the turnaround time will not start until any

ambiguities have been resolved.

Signature/Company	Date	Time	Signature/Company
Relinquished by: 	3/10/2009	4:18	Received by: 
Relinquished by:			Received by:
Relinquished by:			Received by:
Relinquished by:			Received by:
Relinquished by:			Received by:

AB COPIES - WHITE & YELLOW; CLIENT COPY - PINK

Comments:

Lab Case #

PAGE: _____ of _____

MDL Req: GWOS - SCC - OTHER (SEE COMMENTS)

number of time (starts the following day) samples received

Lab notification is required for RUSH TAT prior to sample arrival. RUSH TAT IS NOT GUARANTEED WITHOUT LAB APPROVAL. RUSH SURCHARGES WILL APPLY IF ABLE TO ACCOMMODATE.**

Conditional TPHC		Results needed by:	Rush TAT Charge **	Report Format	DISKETTE
24 hr**	48 hr	72 hr	NA	Results Only	.dbsf format
Verbal/Fax		2 wk/Std	24 hr - 100%*** 48 hr - 75%*** 72 hr - 50%*** 96 hr - 35%***	Reduced	.wki format
24 hr*	48 hr*	72 hr*	5 day - 25%*** 6-9 day 10%	Regulatory	lab approved custom EDD
Hard Copy		3 wk/Std		Other (describe)	

* wk* call for price
** wk* call for price

ANALYTICAL PARAMETERS

[illegible]

	Conc.	Expected:	Low	Med	High
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MDL Req: GWOS - SCC - OTHER (SEE COMMENTS)